

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.  
10-0886036  
APPLICANT(S)

FILING DATE

CLAIMS	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.      DER.	IND.      DER.	IND.      DER.	IND.      DER.
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TOTAL IND.	12									
TOTAL DER.	16									
TOTAL CLAIMS	20									

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS